Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if amende

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kelly First name Robert Middle name Johnston Last name and Suffix (Sr., Jr., II, III)		Jamie First name Lyn Middle name Johnston Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0912		xxx-xx-1506				

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Kelly Robert Johnston Debtor 1 Debtor 2 Jamie Lyn Johnston Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 805 Britten Avenue Lansing, MI 48910-1323 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Ingham County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this

Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition,
 I have lived in this district longer than in any other district.

Number, P.O. Box, Street, City, State & ZIP Code

☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

notices to you at this mailing address.

Check one:

mailing address.

 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

Number, P.O. Box, Street, City, State & ZIP Code

☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) Case:17-01870-swd Doc #:1 Filed: 04/14/2017 Page 3 of 68

	btor 1 Kelly Robert Johns btor 2 Jamie Lyn Johnsto				Case number (if known)	
Pai	rt 2: Tell the Court About	Your Bankruptcy	/ Case			
7.	The chapter of the Bankruptcy Code you are			ch, see Notice Required by a 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrupt e box.	су
	choosing to file under	☐ Chapter 7				
		☐ Chapter 11				
		☐ Chapter 12				
		■ Chapter 13				
8.	How you will pay the fee	about how order. If y	w you may pay. Typically	, if you are paying the fee yo	k with the clerk's office in your local court for more de urself, you may pay with cash, cashier's check, or m alf, your attorney may pay with a credit card or check	oney
					on, sign and attach the Application for Individuals to I	Pay
		☐ I request	g Fee in Installments (Off that my fee be waived required to, waive your t	(You may request this option	n only if you are filing for Chapter 7. By law, a judge r ur income is less than 150% of the official poverty lin	nay, e that
		applies to	your family size and you	are unable to pay the fee ir	n installments). If you choose this option, you must fil it it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
		Dist			Case number	
		Dist		When	Case number	
		Dist	rict	When	Case number	
10.	Are any bankruptcy cases pending or being	■ No				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
		Deb	tor		Relationship to you	
		Dist	rict	When	Case number, if known	
		Deb	tor		Relationship to you	
		Dist	rict	When	Case number, if known	
11.	Do you rent your residence?	■ No. Go	to line 12.			
	residence:	☐ Yes. Ha	s your landlord obtained	an eviction judgment agains	t you and do you want to stay in your residence?	
			No. Go to line 12.			
			Yes. Fill out <i>Initial</i> S bankruptcy petition.	tatement About an Eviction 、	Judgment Against You (Form 101A) and file it with th	is

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	tor 1 Kelly Robert Johns tor 2 Jamie Lyn Johnsto			Case number (if known)					
Part	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.						
	545 655.	☐ Yes.	Name and location of bus	Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any						
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	ox to describe your business:							
	it to this potition.		• • •	ness (as defined in 11 U.S.C. § 101(27A))					
			_	I Estate (as defined in 11 U.S.C. § 101(51B))					
				defined in 11 U.S.C. § 101(53A))					
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))					
			☐ None of the abov	е					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor?</i>	deadline operation	s. If you indicate that you are as, cash-flow statement, and c.C. 1116(1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure					
	For a definition of small	No.	I am not filing under Cha	oter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy					
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Part	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention					
14.	Do you own or have any	■ No.							
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?						
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?						
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?						
				Number, Street, City, State & Zip Code					

Case:17-01870-swd Doc #:1 Filed: 04/14/2017 Page 5 of 68 Debtor 1 Kelly Robert Johnston Debtor 2 Jamie Lyn Johnston Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed briefing about credit counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check counseling agency within the 180 days before I filed counseling agency within the 180 days before I one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. of completion. so, you are not eligible to file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so. Active duty. Active duty. П

I am currently on active military duty in a

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

military combat zone.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

combat zone.

of credit counseling with the court.

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	tor 1 Kelly Robert Johns tor 2 Jamie Lyn Johnsto			Cas	se number (if kn	own)			
Par	6: Answer These Quest	ions for R	eporting Purposes						
	What kind of debts do you have?	16a.				11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consumer debts of	r business deb	ots			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. (Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do y are paid that funds will be availa			s excluded and administrative expenses			
	administrative expenses are paid that funds will		□ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49		1 ,000-5,000		☐ 25,001-50,000			
		☐ 50-99		□ 5001-10,000		5 0,001-100,000			
		□ 100-1 □ 200-9		☐ 10,001-25,000 ☐ More than100,000					
19.	How much do you	□ \$0 - \$	550,000	☐ \$1,000,001 - \$10 million	า	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million		\$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 mill □ \$100,000,001 - \$500 mi		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$	•	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion			
	to be?	_	001 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$1 million	□ \$100,000,001 - \$500 mi	illion	☐ More than \$50 billion			
Par	:7: Sign Below								
For	you	I have ex	camined this petition, and I declare	e under penalty of perjury that t	the information	provided is true and correct.			
			chosen to file under Chapter 7, I a tates Code. I understand the relief			er Chapter 7, 11,12, or 13 of title 11, to proceed under Chapter 7.			
			rney represents me and I did not p nt, I have obtained and read the no			attorney to help me fill out this			
		I request	relief in accordance with the chap	oter of title 11, United States Co	ode, specified	in this petition.			
			cy case can result in fines up to \$			perty by fraud in connection with a or both. 18 U.S.C. §§ 152, 1341, 1519,			
			Robert Johnston		Lyn Johnsto	n			
			obert Johnston e of Debtor 1		n Johnston of Debtor 2				
		Executed	d on April 14, 2017 MM / DD / YYYY	Executed	on April 14,				

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•	pert Johnston rn Johnston	Ca	ase number (if known)
For your attorney, if represented by one	under Chapter 7, 11, 12, or	13 of title 11, United States Code, and have	re informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not repres an attorney, you do to file this page.	sented by and, in a case in which § 70	07(b)(4)(D) applies, certify that I have no kno	owledge after an inquiry that the information in the
	/s/ Kristen L. Krol Signature of Attorney for De	Date	April 14, 2017 MM / DD / YYYY
	Signature of Attorney for Di	autoi	WIIWI / DD / TTTT
	Kristen L. Krol		
	Debt Relief Legal Clinic,	PLLC	
	4710 W. Saginaw Highw		
	Lansing, MI 48917-2654 Number, Street, City, State & ZIP Co		
	Contact phone _(517) 321-6	804 Email address	debtrlc@drlc.com
	P55103		
	Bar number & State		

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	in this inform	nation to identify your	easo:			
Dei	otor 1	Kelly Robert Johns	Middle Name	Last Name		
	otor 2	Jamie Lyn Johnsto				
(Spc	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN		
Cas	se number					
(if kr	nown)				_	k if this is an
					amer	nded filing
<u>Of</u>	ficial For	<u>rm 106Sum</u>				
Su	mmary o	f Your Assets a	and Liabilities ar	nd Certain Statistical Information		12/15
info	rmation. Fill o	out all of your schedule	es first; then complete th	e are filing together, both are equally responsible for information on this form. If you are filing amenous kithe box at the top of this page.		
Par	t 1: Summa	arize Your Assets				
					Your a	assets
					Value	of what you own
1.	Schedule A	/B: Property (Official Fo	orm 106A/B)		•	07 000 00
	1a. Copy line	e 55, Total real estate, fr	om Schedule A/B		\$	97,000.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B		\$	16,122.19
	1c. Copy line	e 63, Total of all property	y on Schedule A/B		\$	113,122.19
Par	t 2: Summa	arize Your Liabilities				
					V I	i a la iliti a a
						iabilities nt you owe
2.			laims Secured by Property nn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	167,809.84
3.	Schodulo E/	E: Craditors Who Have	Unsecured Claims (Officia	J. Form 106E/E)		
Э.				ns) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured c	elaims) from line 6j of Schedule E/F	\$	118,827.90
				Your total liabilities	\$	286,637.74
Par	t 3: Summa	arize Your Income and	Expenses			
4.	Schedule I: \	Your Income (Official Fo	rm 106I)			
٠.		`	,	? I	\$	5,205.00
5.		Your Expenses (Official			\$	3,531.00
					Ψ	5,553355
Par	t 4: Answe	r These Questions for	Administrative and Stati	istical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form to the court with yo	ur other so	hedules.
	■ Yes					
7.	What kind o	of debt do you have?				
	■ Your de	ahta ara primarily aan	114		a nersona	I family or
				debts are those "incurred by an individual primarily for og for statistical purposes. 28 U.S.C. § 159.	a persona	i, idiriny, or

Official Form 106Sum Sum

the court with your other schedules.

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Debtor 1 Kelly Robert Johnston

Debtor 2 Jamie Lyn Johnston

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,571.63

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	16,860.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	16,860.00

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	Case.	11-01010-31	vu L	JUC #.1	Fileu. 04/14/2017	raye	10 01 00		
Fill in this inforn	nation to identify	your case and th	nis filinç	j:					
Debtor 1	Kelly Robert	Johnston							
D. I	First Name		e Name		Last Name				
Debtor 2 (Spouse, if filing)	Jamie Lyn Jo First Name		e Name		Last Name				
United States Ba	nkruptcy Court for	the: WESTERN	I DISTR	ICT OF MICH	IIGAN				
Case number								☐ Check if this	s is ar
								amended fili	
Official Fo	rm 106A/E	<u> </u>							
Schedul	e A/B: Pi	roperty						12	2/15
hink it fits best. Be information. If more Answer every ques	e as complete and e space is needed, tion.	accurate as possibl attach a separate sl	le. If two heet to tl	married peopl his form. On th	an asset fits in more than one e are filing together, both are le top of any additional pages wn or Have an Interest In	equally resp	onsible for su	pplying correct	•
Do you own or h	nave any legal or eg	uitable interest in a	nv resid	ence huilding	, land, or similar property?				
_		juliable lilierest ili e	illy resid	ence, building	, ianu, or similar property:				
No. Go to Part									
Yes. Where is	s the property?								
1.1			What	is the propert	y? Check all that apply				
805 Britten	Avenue			Single-family	home	Do not ded	luct secured cla	aims or exemptions.	Put
Street address,	if available, or other des	scription	_	Duplex or mu	lti-unit building	the amoun	t of any secured	d claims on Schedulens Secured by Prope	le D:
				Condominium	or cooperative	Creditors v	VIIO I lave Claii	is Secured by Frope	ену.
				Manufactured	or mobile home	Current va	lue of the	Current value of	the
Lansing	MI	48910-1323		Land		entire pro	perty?	portion you own	?
City	State	ZIP Code		Investment pr Timeshare	roperty	\$9	97,000.00	\$97,00	00.00
			ä	Other				our ownership inte	
			_		t in the property? Check one		ee simple, tena e), if known.	ancy by the entireti	ies, or
				Debtor 1 only		Tenancy	by Entiretie	es :	
Ingham				Debtor 2 only					
County				Debtor 1 and	Debtor 2 only				
					of the debtors and another		k if this is com structions)	munity property	
				r information y	ou wish to add about this ite	m, such as lo	cal		
			Lot ' Libe	11, Block 4,	Park Heights, City of La Page 24, Ingham Co. R		am County,	MI, recorded in	I
2 Add the dell	ar value of the pe	ortion vou own fo	r all of	VOUR Antries	from Part 1 including an	, antries for			
					from Part 1, including any			\$97,000.	.00
Part 2: Describe									

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debi		Celly Robert amie Lyn Jo			Case number (if known)	
3. C a	ars, vans,	, trucks, trac	tors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
3.1	Make:	Toyota		Who has an interest in the property? Check one		ured claims or exemptions. Put secured claims on Schedule D:
	Model:	Camry		■ Debtor 1 only		ve Claims Secured by Property.
	Year:	2017		Debtor 2 only	Current value of	the Current value of the
	Approxir	mate mileage:	576	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:		At least one of the debtors and another		
	Location	T1BF1FK4F on: 805 Britt g MI 48910-	en Avenue,	☐ Check if this is community property (see instructions)	<u>\$21,754</u>	\$0.00
		Toursto			Do not deduct sec	ured claims or exemptions. Put
3.2		Toyota		Who has an interest in the property? Check one	the amount of any	secured claims on Schedule D:
	Model:	Corolla S	·E	Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2017		Debtor 2 only	Current value of	the Current value of the
		mate mileage:	830	Debtor 1 and Debtor 2 only	entire property?	portion you own?
		formation:		At least one of the debtors and another		
	1	auto lease YFBURHE8	LDesesez	Charletthia is community manager.	\$21,211	.58 \$0.00
	1		en Avenue,	☐ Check if this is community property (see instructions)	Ψ21,211	
		g MI 48910-				
Ц	Yes					
				n for all of your entries from Part 2, including a		\$0.00
Part	2. Dagari	he Very Bered	onal and Household Ite			
				terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		goods and f Major appliar	furnishings nces, furniture, linens	, china, kitchenware		
	Yes. De	escribe				
				s, furnishings and appliances itten Avenue, Lansing MI 48910-1323		\$3,300.00
			-	<u> </u>		
E		Televisions a	and radios; audio, vide I phones, cameras, m	eo, stereo, and digital equipment; computers, prin nedia players, games	ters, scanners; music c	ollections; electronic devices
_	Yes. De	escribe				
			Household electr			*
			Location: 805 Bri	tten Avenue, Lansing MI 48910-1323		\$2,500.00

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1 Debtor 2	Kelly Robert Johnston Jamie Lyn Johnston Case number	(if known)
	ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; state other collections, memorabilia, collectibles	amp, coin, or baseball card collections;
_	Describe	
Examp —	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis musical instruments	; canoes and kayaks; carpentry tools;
■ No □ Yes.	Describe	
10. Firear Exam	ms ples: Pistols, rifles, shotguns, ammunition, and related equipment	
Yes.	Describe	
	Remington 700 fmv \$300 Winchester 22 fmv \$125 Location: 805 Britten Avenue, Lansing MI 48910-1323	\$425.00
☐ No	es ples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Men's clothing Location: 805 Britten Avenue, Lansing MI 48910-1323	\$700.00
	Women's clothing Location: 805 Britten Avenue, Lansing MI 48910-1323	\$1,000.00
□ No	ry ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches Describe	s, gems, gold, silver
_ 100.	Men's jewelry	
	Location: 805 Britten Avenue, Lansing MI 48910-1323	
	Women's jewelry Location: 805 Britten Avenue, Lansing MI 48910-1323	\$300.00
	arm animals uples: Dogs, cats, birds, horses	
	. Describe	
	One cat Location: 805 Britten Avenue, Lansing MI 48910-1323	\$0.00
14. Any o	ther personal and household items you did not already list, including any health aids you did r	not list

☐ Yes. Give specific information.....

Official Form 106A/B Schedule A/B: Property page 3

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	btor 1 btor 2	Kelly Robert Jamie Lyn Jo		n 	Case number (if known)	
15					t 3, including any entries for pages you have attached	\$8,375.00
		scribe Your Finan n or have any l		s quitable interest in an	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No			our wallet, in your home	e, in a safe deposit box, and on hand when you file your petit	ion
					nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each.	houses, and other similar
					Institution name:	
			17.1.	Savings	MSUFCU account ending in 392-09	\$10.00
			17.2.	Savings	MSUFCU account ending in 701- 05	\$12.81
			17.3.	Savings	MSUFCU account ending in 189-05	\$10.60
			17.4.	Checking	MSUFCU account ending in 189-85	\$3,182.44
			17.5.	Savings	MSUFCU account ending in 852-03	\$5.01
			17.6.	Savings	MSUFCU account ending in 852-17	\$59.69
			17.7.	Savings	MSUFCU account ending in 272-09	\$5.37
			17.8.	Savings	Lake Trust CU account ending in 5310	\$8.03
			17.9.	Checking	Lake Trust CU account ending in 5320	\$164.73
			17.10	Checking	Lake Trust CU account ending in 7950	\$1,431.58
			17.11	Savings	Lake Trust CU account ending in 7940	\$2,681.33
			17.12	Checking	Lake Trust CU account ending in 1500	\$175.60
		-		· ·		-

Official Form 106A/B

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	ebtor 1 ebtor 2	Kelly Robert Jamie Lyn Jo		Case number (if known)	
		<u> </u>			
18	_Examp		or publicly traded stocks, investment accounts with b	brokerage firms, money market accounts	
	■ No □ Yes		Institution or issue	er name:	
19	. Non-pu joint ve	•	tock and interests in incor	rporated and unincorporated businesses, including an interest in	an LLC, partnership, and
	■ No				
	☐ Yes.	Give specific in	formation about them Name of entity:		
20	Negotia	able instrument:	s include personal checks, c	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
		Give specific inf	ormation about them Issuer name:		
21		nent or pension les: Interests in		, 403(b), thrift savings accounts, or other pension or profit-sharing pla	ns
	■ Yes. I	List each accou	nt separately. Type of account:	Institution name:	
			Pension	Pinnacle Wealth Strategies (not property of estate, fmv= \$65,339.35)	\$0.00
22	Your sl		ed deposits you have made	so that you may continue service or use from a company nt, public utilities (electric, gas, water), telecommunications companies	, or others
	■ No □ Yes			Institution name or individual:	
23			or a periodic payment of mo	oney to you, either for life or for a number of years)	
	■ No □ Yes	Is	ssuer name and description.		
24	. Interest	s in an educati	on IRA, in an account in a	qualified ABLE program, or under a qualified state tuition progra	am.
	26 U.S.0 ■ No	J. §§ 530(b)(1),	529A(b), and 529(b)(1).		
	☐ Yes	lr	nstitution name and descript	ion. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	. Trusts, □ No	equitable or fu	uture interests in property	(other than anything listed in line 1), and rights or powers exerci	sable for your benefit
	Yes.	Give specific in	formation about them		
				and Jamie L. Johnston Revocable Trust Agreement, 2007 (not currently funded)	\$0.00
26			,	and other intellectual property eeds from royalties and licensing agreements	
	_	Give specific in	formation about them		
27	Examp		and other general intangil rmits, exclusive licenses, co	bles properative association holdings, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific in	formation about them		
M	oney or p	property owed	to you?		Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 5 Case:17-01870-swd Doc #:1 Filed: 04/14/2017 Page 15 of 68

	ebtor 1 ebtor 2	Kelly Robert Johnston Jamie Lyn Johnston	Case number (if known)	
				Do not deduct secured claims or exemptions.
28.	■ No	unds owed to you Give specific information about them, including whether you already filed the	returns and the tax years	
29.	Examp ■ No	support les: Past due or lump sum alimony, spousal support, child support, maintena Give specific information	ance, divorce settlement, property	settlement
30.	Examp ■ No	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits, sick pa benefits; unpaid loans you made to someone else	y, vacation pay, workers' comper	nsation, Social Security
31.	Interes Examp ■ No	Give specific information ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); credit, Name the insurance company of each policy and list its value.	, homeowner's, or renter's insurar	ice
	□ res.	Company name:	Beneficiary:	Surrender or refund value:
32.	If you a someo	rerest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance poline has died. Give specific information	cy, or are currently entitled to rece	eive property because
33.	Examp ■ No	against third parties, whether or not you have filed a lawsuit or made a ples: Accidents, employment disputes, insurance claims, or rights to sue	demand for payment	
34.	Other of	Describe each claim contingent and unliquidated claims of every nature, including countercla	aims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim		
35.	■ No	Give specific information		
36		he dollar value of all of your entries from Part 4, including any entries fo art 4. Write that number here		\$7,747.19
Pa	art 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. List any re	al estate in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-related property? to Part 6. so to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an ou own or have an interest in farmland, list it in Part 1.	Interest In.	
46.	■ No.	own or have any legal or equitable interest in any farm- or commercial Go to Part 7. Go to line 47.	fishing-related property?	

Schedule A/B: Property

Official Form 106A/B

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	otor 1	Kelly Robert Johnston			
Debtor 2 Jamie Lyn Johnston				Case number (if known)	
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
ı arı		Describe Air roperty rou own or nave an interest in that re	d Did Not Elst Above		
53.	•	I have other property of any kind you did not already listoles: Season tickets, country club membership	t?		
	■ No	ores. Ocason nonces, country dub membership			
		Give specific information			
		·		Г	
54.	Add t	he dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
				L	
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	l: Total real estate, line 2			\$97,000.00
56.	Part 2	2: Total vehicles, line 5	\$0.00		
57.	Part 3	3: Total personal and household items, line 15	\$8,375.00		
58.	Part 4	1: Total financial assets, line 36	\$7,747.19		
59.	Part 5	5: Total business-related property, line 45	\$0.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$16,122.19	Copy personal property to	stal \$16,122.19
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$113,122.19

Official Form 106A/B Schedule A/B: Property page 7

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Fil	l in this informa	ation to identify your c	ase:				
De	ebtor 1	Kelly Robert Johnst	on]
De	ebtor 2	First Name	M	liddle Name	L	ast Name	
	ouse if, filing)	First Name	M	liddle Name	L	ast Name	
Un	nited States Bank	ruptcy Court for the:	WEST	ERN DISTRICT OF M	IICHIO	GAN	
	ase number						☐ Check if this is an amended filing
\bigcirc	fficial Fori	m 106C					
			per	tv You Cla	im	as Exempt	4/16
the nee cas For spe any fun exe	property you list eded, fill out and e number (if kno each item of precific dollar amo y applicable star ds—may be un emption to a par	ed on Schedule A/B: Prattach to this page as mwn). roperty you claim as e bunt as exempt. Altern tutory limit. Some exellimited in dollar amount	xempt, natively mption nt. How	(Official Form 106A/B) pies of <i>Part 2: Addition</i> you must specify the polynomial you may claim the form the f	as yo nal Pa e amo ull fai heald exen	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. (ir market value of the property be th aids, rights to receive certain be applied to the property be the aids, rights to receive certain be applied to the property be the property be the aids, rights to receive certain be applied to the property be the aids, rights to receive certain be applied to the property that you applied to the property be the property be the the property be the property be the property be the property be the property be the the property be the the the property be the the the the the the the th	additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement
		the Property You Clai	m as E	xempt			
1.	Which set of e	exemptions are you cla	iming?	? Check one only, ever	n if vo	our spouse is filing with you.	
	_	ming state and federal r	_	•	•	, ,	
		ming federal exemption				(-/(-/	
2					mnt	fill in the information below.	
۷.	Brief description	Specific laws that allow exemption					
		at lists this property		Current value of the portion you own		ount of the exemption you claim	
				Copy the value from Schedule A/B	Cne	eck only one box for each exemption.	
De	ebtor 1 Exempt	ions venue Lansing, MI					11 U.S.C. § 522(d)(1)
	48910-1323	Ingham County		\$97,000.00		\$0.00	11 0.3.0. 9 322(0)(1)
	Lot 11, Block 4, Park Heights, City of Lansing, Ingham County, MI, recorded in Liber 6 of Plats, Page 24, Ingham Co. Records FMV based on Appraisal Line from Schedule A/B: 1.1		rded			100% of fair market value, up to any applicable statutory limit	
	Household go	oods, furnishings and		\$3,300.00		\$1,650.00	11 U.S.C. § 522(d)(3)
		-	sing			100% of fair market value, up to any applicable statutory limit	
	Household el			\$2,500.00		\$1,250.00	11 U.S.C. § 522(d)(3)
	Location: 805 MI 48910-132 Line from Sche	-	sing			100% of fair market value, up to any applicable statutory limit	
	Remington 70 Winchester 2			\$425.00		\$212.50	11 U.S.C. § 522(d)(5)
	Location: 805 MI 48910-132	Britten Avenue, Lan	sing			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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Brief description of the property and line on Current value of the A Schedule A/B that lists this property portion you own		Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Men's clothing Location: 805 Britten Avenue, Lansing	\$700.00		\$700.00	11 U.S.C. § 522(d)(3)	
MI 48910-1323 Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit		
Men's jewelry Location: 805 Britten Avenue, Lansing	\$150.00		\$150.00	11 U.S.C. § 522(d)(4)	
MI 48910-1323 Line from <i>Schedule A/B</i> : 12.1			100% of fair market value, up to any applicable statutory limit		
One cat Location: 805 Britten Avenue, Lansing	\$0.00		\$0.00	11 U.S.C. § 522(d)(3)	
MI 48910-1323 Line from <i>Schedule A/B</i> : 13.1			100% of fair market value, up to any applicable statutory limit		
Savings: MSUFCU account ending in 701- 05	\$12.81		\$6.40	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
Savings: MSUFCU account ending in 189-05	\$10.60		\$5.30	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		
Checking: MSUFCU account ending in 189-85	\$3,182.44		\$1,591.22	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit		
Savings: MSUFCU account ending in 852-03	\$5.01		\$2.50	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit		
Savings: MSUFCU account ending in 852-17	\$59.69		\$29.84	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit		
Checking: Lake Trust CU account ending in 7950	\$1,431.58		\$1,431.58	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.10			100% of fair market value, up to any applicable statutory limit		
Savings: Lake Trust CU account ending in 7940	\$2,681.33		\$2,681.33	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.11			100% of fair market value, up to any applicable statutory limit		
Checking: Lake Trust CU account ending in 1500	\$175.60		\$87.80	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 17.12			100% of fair market value, up to any applicable statutory limit		
Pension: Pinnacle Wealth Strategies	\$0.00		\$0.00	11 U.S.C. § 522(d)(12)	
(not property of estate, fmv= \$65,339.35) Line from <i>Schedule A/B</i> : 21.1			100% of fair market value, up to any applicable statutory limit		

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	Brief description of the property and line on	Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption					
	Schedule A/B that lists this property								
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	Kelly Johnston and Jamie L. Johnston Revocable Trust Agreement, dated	\$0.00	\$0.00	11 U.S.C. § 522(d)(5)					
	march 7, 2007 (not currently funded) Line from Schedule A/B: 25.1		☐ 100% of fair market value, up to any applicable statutory limit						
	3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)								
3.	, ,			nt.)					
3.	, ,			nt.)					
3.	(Subject to adjustment on 4/01/19 and every	3 years after that for ca	ses filed on or after the date of adjustme	,					
3.	(Subject to adjustment on 4/01/19 and every	3 years after that for ca	ses filed on or after the date of adjustme	,					
3.	(Subject to adjustment on 4/01/19 and every 3 ■ No ■ Yes. Did you acquire the property covered	3 years after that for ca	ses filed on or after the date of adjustme	,					

Fil	Il in this information to identify your case:					
De	ebtor 1					
	First Name N	liddle Name	L	ast Name		
	bouse if, filing) Jamie Lyn Johnston First Name N	liddle Name	L	ast Name		
Ur	nited States Bankruptcy Court for the: WEST	ERN DISTRICT OF M	ICHIC	GAN		
Ca	ase number					
(if k	known)					Check if this is an amended filing
\bigcirc	fficial Form 106C					
	chedule C: The Proper	tv You Cla	im	as Exempt		4/16
_		.				
the nee	as complete and accurate as possible. If two m property you listed on Schedule A/B: Property eded, fill out and attach to this page as many cose number (if known).	(Official Form 106A/B)	as yo	our source, list the property that you	claim as ex	empt. If more space is
spe any fun exe	r each item of property you claim as exempt, ecific dollar amount as exempt. Alternatively y applicable statutory limit. Some exemption ids—may be unlimited in dollar amount. However, the control of th	 you may claim the f s—such as those for vever, if you claim an 	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	ing exempt enefits, and e under a l	ted up to the amount of d tax-exempt retirement aw that limits the
	the applicable statutory amount.	vamnt				
Fε	Identify the Property You Claim as E	xempt				
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.		
	☐ You are claiming state and federal nonbank	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)		
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ne Amount of the exemption you claim		Specific la	ws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
De	ebtor 2 Exemptions					
	805 Britten Avenue Lansing, MI 48910-1323 Ingham County	\$97,000.00		\$0.00	11 U.S.C	C. § 522(d)(1)
	Lot 11, Block 4, Park Heights, City of Lansing, Ingham County, MI, recorded in Liber 6 of Plats, Page 24, Ingham Co.			100% of fair market value, up to any applicable statutory limit		
	Records					
	FMV based on Appraisal Line from <i>Schedule A/B</i> : 1.1					
	Household goods, furnishings and	\$3,300.00		\$1,650.00	11 U.S.C	C. § 522(d)(3)
	appliances Location: 805 Britten Avenue, Lansing MI 48910-1323 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
					441100	0.500(1)(0)
	Household electronics Location: 805 Britten Avenue, Lansing	\$2,500.00		\$1,250.00	11 U.S.C	C. § 522(d)(3)
	MI 48910-1323 Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Remington 700 fmv \$300 Winchester 22 fmv \$125 Location: 805 Britten Avenue, Lansing MI 48910-1323 Line from <i>Schedule A/B</i> : 10.1	\$425.00		\$212.50 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)
Women's clothing Location: 805 Britten Avenue, Lansing	\$1,000.00	•	\$1,000.00	11 U.S.C. § 522(d)(3)
MI 48910-1323 Line from <i>Schedule A/B</i> : 11.2			100% of fair market value, up to any applicable statutory limit	
Women's jewelry Location: 805 Britten Avenue, Lansing	\$300.00		\$300.00	11 U.S.C. § 522(d)(4)
MI 48910-1323 Line from <i>Schedule A/B</i> : 12.2			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 392-09	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 701- 05	\$12.81		\$6.41	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 189-05	\$10.60	•	\$5.30	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Checking: MSUFCU account ending in 189-85	\$3,182.44		\$1,591.22	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 852-03	\$5.01	•	\$2.51	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 852-17	\$59.69		\$29.85	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit	
Savings: MSUFCU account ending in 272-09	\$5.37	•	\$5.37	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.7			100% of fair market value, up to any applicable statutory limit	
Savings: Lake Trust CU account ending in 5310	\$8.03		\$8.03	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.8			100% of fair market value, up to any applicable statutory limit	
Checking: Lake Trust CU account ending in 5320	\$164.73		\$164.73	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.9			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	, , , , , ,		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	necking: Lake Trust CU account ading in 1500	\$175.60		\$87.80	11 U.S.C. § 522(d)(5)			
	ne from <i>Schedule A/B</i> : 17.12			100% of fair market value, up to any applicable statutory limit				
	elly Johnston and Jamie L. Johnston	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)			
ma	march 7, 2007 (not currently funded) Line from Schedule A/B: 25.1			100% of fair market value, up to any applicable statutory limit				
	3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)							
_	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?							
	□ No	, , , , , , , , , , , , , , , , , , , ,		, ,,				
	☐ Yes							

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Fill in this information to identify yo	ur case.			
Debtor 1 Kelly Robert Joh	nnston Middle Name Last Name		-	
Debtor 2 Jamie Lyn John	ston			
(Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for the	: WESTERN DISTRICT OF MICHIGAN		-	
Case number				
(if known)			_	if this is an led filing
000 1 5 4005				
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Secure	ed by Propert	У	12/15
	If two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors have claims secured b	y your property?			
☐ No. Check this box and submit	this form to the court with your other schedules.	. You have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separat	tely Column A	Column B	Column C
	s a particular claim, list the other creditors in Part 2. A		Value of collateral that supports this claim	Unsecured portion If any
2.1 PNC Mortgage Creditor's Name	Describe the property that secures the claim:	\$26,230.74	\$97,000.00	\$26,230.74
PO Box 1820 Dayton, OH 45401-1820 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred	805 Britten Avenue Lansing, MI 48910-1323 Ingham County Lot 11, Block 4, Park Heights, City of Lansing, Ingham County, MI, recorded in Liber 6 of Plats, Page 24, Ingham Co. Records FMV based on Appraisal As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 523:	Mortgage		
		<u>-</u>		
2.2 Specialized Loan Servicing Creditor's Name 8742 Lucent Blvd. Ste. 300 Littleton, CO 80129	Describe the property that secures the claim: 805 Britten Avenue Lansing, MI 48910-1323 Ingham County Lot 11, Block 4, Park Heights, City of Lansing, Ingham County, MI, recorded in Liber 6 of Plats, Page 24, Ingham Co. Records FMV based on Appraisal As of the date you file, the claim is: Check all that apply. □ Contingent	\$141,579.10	\$97,000.00	\$44,579.10
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			

Official Form 106D

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Debtor 1	Kelly Robert Johns	ton		Cas	e number (_{if know})	
	First Name	Middle Name	Last Name	_	_	
Debtor 2	Jamie Lyn Johnsto	n				
	First Name	Middle Name	Last Name			
☐ Debtor ☐ Debtor ☐ Debtor	•	car loa	eement you made (such as in) ry lien (such as tax lien, me		I	
_	· · · · · · · · · · · · · · · · · · ·	acthor \square Judgme	ent lien from a lawsuit	,		
— • • • • • • • • • • • • • • • • • • •			including a right to offset)	First Mortgage		
Date debt	was incurred	Las	t 4 digits of account num	nber <u>0156</u>		
Add the	dollar value of your entr	ies in Column A on	this page. Write that nun	nber here:	\$167,809.84	1
	the last page of your for at number here:	m, add the dollar va	alue totals from all pages		\$167,809.84]

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	3000. 2. 3 2.	5. 5 5. 6 5. 6 5. 6 5. 6 5. 6 5. 6 5. 6		,_ ,		
Fill in this	information to identify your ca	se:				
Debtor 1	Kelly Robert Johnsto	n				
	First Name	Middle Name	Last Name			
Debtor 2	Jamie Lyn Johnston					
(Spouse if, fili	ng) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT OF MI	CHIGAN			
Case num	har					
(if known)						Check if this is an
					a	amended filing
Official	Form 106E/E					
	Form 106E/F	a Haya Unagayraa	l Claima			10/15
	ule E/F: Creditors Wh			2. (0)	MARIORITY	12/15
Schedule G Schedule Di left. Attach t	ory contracts or unexpired leases th : Executory Contracts and Unexpire : Creditors Who Have Claims Secure the Continuation Page to this page. ase number (if known).	d Leases (Official Form 106G). ed by Property. If more space is	Do not include needed, copy	any creditors with partially the Part you need, fill it out	secured claims , number the er	s that are listed in atries in the boxes on the
	List All of Your PRIORITY Unse					
_ `	creditors have priority unsecured of	laims against you?				
No.	Go to Part 2.					
☐ Yes						
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
3. Do any	r creditors have nonpriority unsecur	ed claims against you?				
☐ No.	You have nothing to report in this part	Submit this form to the court wit	h your other sch	edules.		
■ Yes	i.					
unsecu	of your nonpriority unsecured claim red claim, list the creditor separately for the creditor holds a particular claim, list	r each claim. For each claim liste	ed, identify what	type of claim it is. Do not list	claims already in	cluded in Part 1. If more
rait 2.						Total claim
4.1 Aı	merican Express	Last 4 digits of ac	count number	1001		\$4,538.37
	onpriority Creditor's Name		count number	1001		Ψ+,550.57
	O Box 981535	When was the del	ot incurred?	2003-2017		_
	Paso, TX 79998 umber Street City State Zlp Code	As of the date you	ı file. the claim	is: Check all that apply		
	ho incurred the debt? Check one.	,	,			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and anoth		RITY unsecure	d claim:		
	Check if this claim is for a commu	nity Student loans				
de Is	bt the claim subject to offset?	☐ Obligations aris		ration agreement or divorce	that you did not	
	No			g plans, and other similar de	hts	
_	. 110	20000 to poriodo	Credit card amount of la	purchases - disputed a ate fees, overlimit fees	as to the , interest	
	Yes	Other. Specify	fees, late ch or charge	arges or any other ad	ditional fees	_

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	or 2 Jamie Lyn Johnston			Case number (if know)	
4.2	Citibank, N.A. Nonpriority Creditor's Name	Last 4 digits of account nu	mber	9574	\$936.45
	Attn Bankruptcy PO Box 6191 Sioux Falls, SD 57117	When was the debt incurred	d?	2014-2017	_
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY uns	ecure	I claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of report as priority claims	a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-	sharin	g plans, and other similar debts	
	☐ Yes	as to th	ne am t fees	t Credit card purchases - disputed nount of late fees, overlimit fees, s, late charges or any other es or charge	_
4.3	Citibank, N.A.	Last 4 digits of account nu	mber	5334	\$1,842.74
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 6191	When was the debt incurred	d?	2012-2017	_
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the	claim i	s: Check all that apply	
	■ Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY uns	ecure	I claim:	
	☐ Check if this claim is for a community debt	☐ Student loans			
	ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-	sharin	g plans, and other similar debts	
	□Yes	to the a	amou t fees	edit card purchases - disputed as nt of late fees, overlimit fees, , late charges or any other es or charge	_

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Debtor Debtor	1 Kelly Robert Johnston 2 Jamie Lyn Johnston		Case number (if know)	
4.4	Citibank, N.A.	Last 4 digits of account number	0946	\$6,092.99
	Nonpriority Creditor's Name Attn Bankruptcy PO Box 6191	When was the debt incurred?	2014-2017	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	the amount	t card purchases - disputed as to of late fees, overlimit fees, interest larges or any other additional fees	
		or orlargo		
4.5	Kohl's Credit Recovery Nonpriority Creditor's Name	Last 4 digits of account number	2866	\$730.61
	PO Box 3004 Milwaukee, WI 53201	When was the debt incurred?	2003-2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	_	amount of la fees, late ch	purchases - disputed as to the ate fees, overlimit fees, interest earges or any other additional fees	
	Yes	Other. Specify or charge		
4.6	Lending Club	Last 4 digits of account number	9230	\$14,634.21
	Nonpriority Creditor's Name 71 Stevenson Street Suite 300 San Francisco, CA 94105	When was the debt incurred?	2014-2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Personal Lo	an	

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Debtor 1 Debtor 2	Kelly Robert Johnston Jamie Lyn Johnston		Case number (if know)	
	Lending Club Nonpriority Creditor's Name	Last 4 digits of account number	5898	\$17,304.13
7	71 Stevenson Street Suite 300 San Francisco, CA 94105	When was the debt incurred?	2014-2017	
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
_	<u> </u>			
	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	Labelia	
L	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
c	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
_	_			
	No	Debts to pension or profit-sharin		
[Yes	Other. Specify Personal Lo	an	
	MSU Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	5230	\$30,733.36
3 F	3777 West Road PO Box 1208 East Lansing, MI 48826-1208	When was the debt incurred?	2006-2017	
\ \	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
[Debtor 1 only	☐ Contingent		
[Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	Disputed		
[☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
[☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	No	Debts to pension or profit-sharin	g plans, and other similar debts	
I	□ Yes	amount of la	purchases - disputed as to the ate fees, overlimit fees, interest larges or any other additional fees	
	Prosper Funding LLC	Last 4 digits of account number	4694	\$2,800.82
2	Nonpriority Creditor's Name 221 Main Street Ste. 300 San Francisco, CA 94105	When was the debt incurred?	2014-2017	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	,	
ı	Debtor 1 only	☐ Contingent		
_	☐ Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
c	debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
I	No	☐ Debts to pension or profit-sharin		
[☐ Yes	Other. Specify Personal Lo	an	

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Debtor 1 Kelly Robert Johnston Debtor 2 Jamie Lyn Johnston		Case number (if know)		
4.1 0	Sallie Mae	Last 4 digits of account number	3984	\$6,247.13
	Nonpriority Creditor's Name PO Box 9635 Wilkes Barre, PA 18773	When was the debt incurred?	9/28/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	Contingent		
		☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	u Ciaiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	Yes	Other. Specify Smart Option	on Career Loan	
4.1	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	4766	\$919.54
	ATTN Bankruptcy Dept PO Box 965064 Orlando, FL 32896	When was the debt incurred?	2001-2017	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	■ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
		as to the an interest fee	Credit card purchases - disputed nount of late fees, overlimit fees, s, late charges or any other	
	Yes	Other. Specify additional fe	ees or charge	

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Debtor Debtor	1 Kelly Robert Johnston 2 Jamie Lyn Johnston		Case number (if know)	
4.1	Synchrony Bank	Last 4 digits of account number	3569	\$5,021.38
	Nonpriority Creditor's Name ATTN Bankruptcy Dept PO Box 965064 Orlando, FL 32896	When was the debt incurred?	2001-2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	as to the an	Credit card purchases - disputed nount of late fees, overlimit fees, s, late charges or any other ees or charge	
4.1	Synchrony Bank	Last 4 digits of account number	9164	\$7,670.96
	Nonpriority Creditor's Name ATTN Bankruptcy Dept PO Box 965064	When was the debt incurred?	2001-2017	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	as to the an interest fee	Credit card purchases - disputed nount of late fees, overlimit fees, s, late charges or any other ees or charge	

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Debtor Debtor	Kelly Robert Johnston Jamie Lyn Johnston		Case number (if know)				
4.1	Synchrony Bank	Last 4 digits of account number	9431	\$337.70			
	Nonpriority Creditor's Name ATTN Bankruptcy Dept PO Box 965064	When was the debt incurred?	2016-2017				
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	as to the a	Credit card purchases - disputed mount of late fees, overlimit fees, s, late charges or any other ees or charge				
4.1	Synchrony Bank	Last 4 digits of account number	6418	\$2,157.51			
	Nonpriority Creditor's Name ATTN Bankruptcy Dept PO Box 965064	When was the debt incurred?	2015-2017				
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims					
	No	Debts to pension or profit-shari	ng plans, and other similar debts				
	☐ Yes	to the amo interest fee	redit card purchases - disputed as unt of late fees, overlimit fees, s, late charges or any other ees or charge				

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	1 Kelly Robert Johnston 2 Jamie Lyn Johnston		Case number (if know)	
4.1	US Department of Education	Last 4 digits of account number	, 1506	\$10,388.00
	Nonpriority Creditor's Name PO Box 16448	When was the debt incurred?	2015-2016	-
	Saint Paul, MN 55116 Number Street City State Zlp Code	As of the date you file, the clain	n is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	_	ed claim:	
	☐ Check if this claim is for a communi	- <u> </u>		
	debt Is the claim subject to offset?	□ Obligations arising out of a sepreport as priority claims	paration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-shar	ring plans, and other similar debts	
	Yes	☐ Other. Specify		
			ford Unsubsidized Loan	-
4.1	US Department of Education	Last 4 digits of account number	r 1506	\$6,472.00
	Nonpriority Creditor's Name PO Box 16448	When was the debt incurred?	2015-2016	
	Saint Paul, MN 55116 Number Street City State Zlp Code	As of the date you file, the claim	n is: Check all that apply	
	Who incurred the debt? Check one.	_		
	☐ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecur	ad alaim.	
	At least one of the debtors and another	O 1 11	eu ciaiii.	
	☐ Check if this claim is for a communi debt			
	Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts	
	Yes	Other. Specify		-
			ford Subsidized Loan	
is try have	his page only if you have others to be not ing to collect from you for a debt you owe	fied about your bankruptcy, for a debt that to someone else, list the original creditor ts that you listed in Parts 1 or 2, list the ad	you already listed in Parts 1 or 2. For examp in Parts 1 or 2, then list the collection agenc ditional creditors here. If you do not have ad	y here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo		
	Student Loan Servicing Sentral Park Drive, #600	·	Part 1: Creditors with Priority Unsecured Cla	
	oma City, OK 73105		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	0781	
	and Address Student Loan Servicing	On which entry in Part 1 or Part 2 did you Line 4.17 of (Check one):	ou list the original creditor? Part 1: Creditors with Priority Unsecured Cla	ims
	entral Park Drive, #600		■ Part 2: Creditors with Nonpriority Unsecured	Claims
Okian	oma City, OK 73105	Last 4 digits of account number	0781	
	and Address d States Attorney's Off.	On which entry in Part 1 or Part 2 did you Line 4.16 of (Check one):		
	Division		☐ Part 1: Creditors with Priority Unsecured Cla ☐ Part 2: Creditors with Nonpriority Unsecured	
_	ox 208	'	— Fatt 2. Creditors with Nonphonty Onsecured	Ciaiiiis
Grand	d Rapids, MI 49501-0208	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?	
	d States Attorney's Off.		☐ Part 1: Creditors with Priority Unsecured Cla	ims
Official F	Form 106 E/F	Schedule E/F: Creditors Who Have Unsecu	red Claims	Page 8 of

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Debtor 1 Kelly Robert Johnston Debtor 2 Jamie Lyn Johnston	Case number (if know)	
Civil Division PO Box 208 Grand Rapids, MI 49501-0208	■ Part 2: Creditors with Nonpri	ority Unsecured Claims
1 /	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

6a.				
ua.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	16,860.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	101,967.90
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	118,827.90
	6c. 6d. 6e. 6f. 6g. 6h. 6i.	 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i.	6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 8 6c. \$ 6d. \$ 6

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kelly Robert Johns			
	First Name	Middle Name	Last Name	
Debtor 2 Jamie Lyn Johnston				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (DF MICHIGAN	
Case number _ (if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Toyota Financial Services 19001 S. Western Avenue, WF22 Torrance, CA 90501	Acct# 4VA741 Opened 3/21/17 Auto Lease 2017 Toyota Camry 576 miles VIN: 4T1BF1FK4HU664484 Location: 805 Britten Avenue, Lansing MI 48910-1323
2.2	Toyota Financial Services 19001 S. Western Avenue, WF22 Torrance, CA 90501	Acct# 4V2486 Opened 3/18/2017 Auto Lease 2017 Toyota Corolla SE 830 miles 36-mo auto lease VIN: 5YFBURHE8HP626267 Location: 805 Britten Avenue, Lansing MI 48910-1323

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Fill in this	information to identify you	r case:			
Debtor 1	Kelly Robert Johr	nston			
	First Name	Middle Name	Last Name		
Debtor 2	Jamie Lyn Johns				
(Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRICT (OF MICHIGAN		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
O.(;, .,	1.5				
	I Form 106H				
Sched	lule H: Your Cod	debtors			12/15
■ No □ Yes 2. With Arizon ■ No. □ Yes	hin the last 8 years, have yona, California, Idaho, Louisiana, Go to line 3. S. Did your spouse, former spo	ou lived in a community pr a, Nevada, New Mexico, Pu ouse, or legal equivalent live	roperty state or territor lerto Rico, Texas, Wash e with you at the time?	r y? (<i>Community proper</i> ington, and Wisconsin.)	ty states and territories include) ng with you. List the person shown
in line Form out Co	e 2 again as a codebtor only	if that person is a guaran al Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed to DGG). Use Schedule D,	he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
	, Hambor, Sheet, Ony, State and	5500		Check all schedul	εο ιπαι αμμιγ.
3.1				Schedule D, lir	ne
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lir	ne
=	Number Street			_	
	City	State	ZIP Code		
				Под из в п	
3.2	Name			Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule E/F,☐ Schedule G, Iir	
-				— Ochedule G, III	
	Number Street City	State	ZIP Code		
	Ony	State	Zir Couc		

Fill in this informa	tion to identify your case:	
Debtor 1	Kelly Robert Johnston	
Debtor 2 (Spouse, if filing)	Jamie Lyn Johnston	
United States Bar	nkruptcy Court for the: WESTERN DISTRICT OF MICHIGAN	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. ■ Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Organizational Services Colorist Include part-time, seasonal, or American Board of Emergency self-employed work. Douglas J Aveda Salon Employer's name Medicine Occupation may include student or homemaker, if it applies. **Employer's address** 3000 Coolidge Road 4663 Ardmore Avenue East Lansing, MI 48823 Okemos, MI 48864 How long employed there? Since 8/2016 Since 3/2011

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

					non-filing spouse	
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	6,488.00	\$	1,572.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$	6,488.00	\$	1,572.00

Official Form 106I Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Kelly Robert Johnston Jamie Lyn Johnston	-	(Case	e number (<i>if known</i>)			
					Fo	r Debtor 1		or Debtor 2 or on-filing spouse	
	Cop	by line 4 here	4.		\$	6,488.00	\$	1,572.00	l.
_					_		-		•
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	58		\$_	1,277.00	\$	273.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$_	0.00	
	5c.	Voluntary contributions for retirement plans	50	Э.	\$_	487.00	\$_	0.00	
	5d.	Required repayments of retirement fund loans	50		\$_	0.00	\$_	0.00	
	5e.	Insurance	56		\$_	0.00	\$_	0.00	
	5f.	Domestic support obligations	5f		\$_	0.00	\$_	0.00	
	5g.	Union dues	50	-	\$_	0.00	\$_	0.00	•
	5h.	Other deductions. Specify: 401(k) Loan 1 [matures 10/29/20]	_ 5r	า.+	\$_	185.00	_	0.00	
		401(k) Loan 2 (matures 9/28/18)	_		\$_	610.00	\$_	0.00	
		Omaha Group Term Life	_		\$_	23.00	\$_	0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,582.00	\$	273.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	3,906.00	\$_	1,299.00	
8.	8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8a 8b		\$_ \$_	0.00	\$ \$_	0.00	
	ОС.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	80	d.	\$	0.00	\$	0.00	
	8e.	Social Security	86	€.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_	0.00	\$_	0.00	
	8g.	Pension or retirement income	80	-	\$_	0.00	\$_	0.00	
	8h.	Other monthly income. Specify:	_ 8r	Դ.+	\$_	0.00	+ \$_	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$_	0.00	\$_	0.00)
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,906.00 + \$,299.00 = \$	5,205.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		3,900.00		<u>,299.00</u> – 4 —	5,205.00
11.	Stat Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•			0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certaillies						12. \$	5,205.00
13.		you expect an increase or decrease within the year after you file this form. No.	?					Combir monthly	ned y income
		Yes. Explain:							

Eill	in this informa	ation to identify yo	our case:					
	otor 1	Kelly Robert				Che	ck if this is:	
							An amended filing	
	otor 2 ouse, if filing)	Jamie Lyn Jol	hnston					wing postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the:	WESTE	ERN DISTRICT OF MICHI	GAN		MM / DD / YYYY	
	se number (nown)							
0	fficial Fo	rm 106J						
S	chedule	J: Your I	Exper	ises				12/1
info	ormation. If m		eded, atta	If two married people and the control of the contro				
Par		ribe Your House	hold					
1.	Is this a joir							
		o line 2. es Debtor 2 live i	n a separ	ate household?				
	_ 100. D 0		n a copan					
			t file Offici	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Del	otor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		8	□ No ■ Yes
					Daughter		10	□ No ■ Yes
								□ No □ Yes
								□ No □ Yes
3.	expenses of	penses include of people other the d your depender	han $_{f \Box}$	No Yes				□ Yes
Est	timate your ex	a date after the b	our bankrı	uptcy filing date unless y				apter 13 case to report of the form and fill in the
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home ownersl and any rent for the		ses for your residence. I r lot.	nclude first mortgage	e 4.	\$	0.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
		erty, homeowner's				4b.		0.00
		e maintenance, re eowner's associati				4c. 4d.	·	150.00 0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

	btor 1 Kelly Robert Johnston btor 2 Jamie Lyn Johnston	Case nun	nber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	. \$	200.00
	6b. Water, sewer, garbage collection	6b.	. \$	300.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	. \$	388.00
	6d. Other. Specify:	6d.	. \$	0.00
7.	Food and housekeeping supplies	7.	. \$	820.00
8.	Childcare and children's education costs	8.	·	0.00
9.	Clothing, laundry, and dry cleaning	9.	. \$	114.00
10.	Personal care products and services	10.	. \$	100.84
11.	• • • • • • • • • • • • • • • • • • • •	11.	. \$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.	12	œ.	200.00
40	Do not include car payments.	12.	· .	
	Entertainment, clubs, recreation, newspapers, magazines, and		·	100.00
	Charitable contributions and religious donations	14.	. \$	40.00
15.	Insurance. Do not include insurance deducted from your pay or included in lin	es 4 or 20		
	15a. Life insurance	es 4 01 20. 15a.	\$	78.75
	15b. Health insurance	15b.	· ·	0.00
	15c. Vehicle insurance	15c.	· ·	239.00
	15d. Other insurance. Specify:	15d.	·	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in			0.00
	Specify:	16.	. \$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	. \$	243.48
	17b. Car payments for Vehicle 2	17b.	. \$	326.44
	17c. Other. Specify: Department of Ed, Graduated Repayr		· -	100.49
	17d. Other. Specify:	17d.	. \$	0.00
18.	Your payments of alimony, maintenance, and support that you deducted from your pay on line 5, Schedule I, Your Income (O		. \$	0.00
19.	Other payments you make to support others who do not live v	vith you.	\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of th			0.00
	20a. Mortgages on other property	20a.	· ·	0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20e.	· <u> </u>	0.00
21.	Other: Specify: Auto Maintenance	21.	· <u> </u>	50.00
	Pets		+\$	80.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,531.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Off	icial Form 106J-2	\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,531.00
23	Calculate your monthly net income.			
20.	23a. Copy line 12 (your combined monthly income) from Schedul	e I. 23a.	\$	5,205.00
	23b. Copy your monthly expenses from line 22c above.	23b.		3,531.00
	200. Copy your monthly expenses from the 220 above.	230.	Ψ	5,551.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	. \$	1,674.00
24.	For example, do you expect to finish paying for your car loan within the year modification to the terms of your mortgage? No.			e or decrease because of a
	☐ Yes. Explain here:			

Fill in this inform	nation to identify your	case:		
Debtor 1	Kelly Robert Johns	ton Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Jamie Lyn Johnsto	n Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN	
Case number(if known)				☐ Check if this is an amended filing
Official Form Declarat i	-	n Individua	I Debtor's Schedu	les 12/15
obtaining money years, or both. 18		connection with a ba		false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Did you pay	or agree to pay some	one who is NOT an atto	orney to help you fill out bankruptcy	forms?
■ No □ Yes. N	ame of person			attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the su	mmary and schedules filed with this	declaration and
	Robert Johnston		X /s/ Jamie Lyn Johnsto	on
	obert Johnston e of Debtor 1		Jamie Lyn Johnston Signature of Debtor 2	
Date A	pril 14, 2017		Date <u>April 14, 2017</u>	

Fill	in this infor	nation to identify you	case:			
De	btor 1	Kelly Robert Johr	nston Middle Name	Last Name		
De	btor 2	Jamie Lyn Johns	ton			
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	F MICHIGAN		
Ca	se number					
	nown)					Check if this is an amended filing
~ ¹	:::::::	407				
	ficial Fo		Affairs for Indivi	duals Filing for	Bankruptcy	4/16
info	rmation. If n		attach a separate sheet to		are equally responsible for su any additional pages, write yo	
Pa	rt 1: Give I	Details About Your Ma	rital Status and Where You	u Lived Before		
1.	What is you	r current marital statu	s?			
	■ Married Not ma					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you l	ived in the last 3 years. Do n	ot include where you live r	now.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior	Address:	Dates Debtor 2 lived there
3. stat					nunity property state or territo o Rico, Texas, Washington and	
	■ No					
	_	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	official Form 106H).		
Pa	rt 2 Expla	in the Sources of You	r Income			
4.	Fill in the tot	al amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including p		endar years?
	□ No					
	_	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$17,999.0	0 ■ Wages, commissions, bonuses, tips	\$4,749.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Kelly Robert Johnston Jamie Lyn Johnston							Ca	ase nu	mber (if known)		
				Dahtan 4				_	-h 0		
					of income that apply.		s income re deductions and sions)	S	ebtor 2 ources of inc heck all that a		Gross income (before deductions and exclusions)
For last (January		r year: ecember 3	1, 2016)	■ Wages bonuses,	es, commissions, , tips				Wages, com	nmissions,	\$5,619.00
				☐ Opera	ting a business				Operating a	business	
		r year bef ecember 3		■ Wages bonuses,	s, commissions, tips		\$74,496.00		l Wages, com onuses, tips	nmissions,	\$0.00
				☐ Opera	ting a business				Operating a	business	
winn	ings. If y each sou No	ou are filir	ng a joint cas	e and you l	have income that	you recei	ved together, list it	t only (once under D	ebtor 1.	d gambling and lottery
				Debtor 1 Sources of Describe	of income below.	each	s income from source re deductions and sions)	S	ebtor 2 ources of inc escribe below		Gross income (before deductions and exclusions)
Part 3:	l ist C	ortain Pav	ments You	Made Refe	ore You Filed for		,				
_	either D No. N ir C Yes. C	ebtor 1's leither De dividual pouring the Subject to Subject to Subject 1 o	or Debtor 2' btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e include payo	s debts prebtor 2 ha personal, for you filed a cach creditor. Do not payments to on 4/01/19 ar both have re you filed a cach creditor.	imarily consume s primarily consume s primarily consume imarily, or househo for bankruptcy, di or to whom you par not include paymer or an attorney for to and every 3 year e primarily consum for bankruptcy, di or to whom you par omestic support or	r debts? umer debts? id purpos id you pa id a total hts for do his bankr is after the umer debt id you pa	ots. Consumer delete." y any creditor a too of \$6,425* or more mestic support obluptcy case. at for cases filed o ots. y any creditor a too of \$600 or more all	e in on digation or a stall of \$\frac{1}{2}\$	e or more payns, such as charter the date of	re? /ments and the support a suppor	
Cre	ditor's l	Name and	attorney for Address	this bankru	ptcy case. Dates of payme	ent	Total amount	Α	mount you	Was this r	payment for
							paid		still owe		•
874	12 Luce	d Loan S nt Blvd. S O 80129	Ste. 300		Last 90 days		\$2,697.48	\$1	41,579.10	■ Mortgag □ Car □ Credit (□ Loan R □ Supplie □ Other_	Card epayment rs or vendors

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	btor 2 Jamie Lyn Johnston		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yo g securities; and ar	u are a general party managing ager	artner; corporations nt, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment
В.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	any property on a	ecount of a debt	that benefited an
	No					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for thi	
			paid	still owe	Include creditor	's name
Par	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims action	s, divorces, collectio	n suits, paternity a	ctions, support or	custody
	Case title Case number	Nature of the case	Court or agency		Status of the c	ase
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached, s	eized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
	Ground Humb and Address	Explain what happened	d	Julo		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any amo	ounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar		erty in the possess			of creditors, a
	No					
	Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt No	cy, did you give any gift	s with a total value	of more than \$60	0 per person?	
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts			s you gave	Value
	Person to Whom You Gave the Gift and Address:			the g	tts	

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Debtor Debtor			Ca	ase number	(if known)	
14. W i	No		did you give any gifts or contributions	s with a tota	I value of more than s	\$600 to any charity?
G m C	Yes. Fill in the details for each gift or or contributions to charities that nore than \$600 charity's Name address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed		Dates you contributed	Value
Part 6	List Certain Losses					
	ithin 1 year before you filed for bankru gambling?	uptcy o	r since you filed for bankruptcy, did yo	ou lose anyt	hing because of thef	t, fire, other disaster,
	No Yes. Fill in the details.					
	escribe the property you lost and ow the loss occurred	Includ	ribe any insurance coverage for the loade the amount that insurance has paid. Listince claims on line 33 of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Part 7	List Certain Payments or Transfer	s				
co	onsulted about seeking bankruptcy or	prepar	lid you or anyone else acting on your ling a bankruptcy petition? ers, or credit counseling agencies for serv			ty to anyone you
	No Yes. Fill in the details.					
A E	erson Who Was Paid ddress mail or website address erson Who Made the Payment, if Not	You	Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment
D 4 L	Debt Relief Legal Clinic, PLLC 710 W. Saginaw Highway, Suite C ansing, MI 48917-2654 ebtrlc@drlc.com		Attorney Fees		4/3/2017	\$1,200.00
1	DECAF 14 Goliad Street fort Worth, TX 76126-2009		Credit Counseling course		4/10/2017	\$15.00
pr	omised to help you deal with your cre o not include any payment or transfer tha	ditors	lid you or anyone else acting on your lor to make payments to your creditors sted on line 16.		r transfer any proper	ty to anyone who
	No Yes. Fill in the details.					
	erson Who Was Paid ddress		Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment
tra Ind ind	ansferred in the ordinary course of you clude both outright transfers and transfer clude gifts and transfers that you have all No	ur busi s made	as security (such as the granting of a se			
	Tool I III III dollario		December on decision of	Describ		Date transfer
Α	erson Who Received Transfer ddress		Description and value of property transferred		any property or received or debts change	Date transfer was made
Р	erson's relationship to you					

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	btor 1 Kelly Robert Johnston btor 2 Jamie Lyn Johnston			Case num	nber (if known)	
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p No Yes. Fill in the details.		any property to a	self-settle	ed trust or similar device	e of which you are a
	Name of trust	Description and	d value of the pro	nerty trans	sfarrad	Date Transfer was
	Revocable Trust	Description and	a value of the pro	perty trains	sierred	made
	Revocable Trust					
Par	rt 8: List of Certain Financial Accounts, I	nstruments, Safe Depo	sit Boxes, and St	orage Unit	ts	
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No	or other financial acco	ounts; certificates	of deposi		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	MSU Federal Credit Union 3777 West Road PO Box 1208 East Lansing, MI 48826-1208	XXXX -9706	☐ Checking ■ Savings ☐ Money Mar ☐ Brokerage ☐ Other	rket	January 2017	\$30.00
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe	access to it?		posit box or other depo	Do you still have it?
22.	Have you stored property in a storage unit No Yes. Fill in the details.	State and ZIP Code)		year befor	re you filed for bankrup	tcy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Numbe State and ZIP Code)	r, Street, City,	Describe	the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Contro	ol for Someone Else				
23.			clude any proper	ty you bor	rowed from, are storing	for, or hold in trust
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pr (Number, Street, Cit Code)		Describe	the property	Value

Debtor 1 Kelly Robert Johnston Debtor 2 Jamie Lyn Johnston

Case number (if known)

Pai	rt 10: G	Give Details About Environmental Informa	tion			
For	the purp	pose of Part 10, the following definitions a	apply:			
	toxic s	nmental law means any federal, state, or leubstances, wastes, or material into the air ions controlling the cleanup of these sub	r, land, soil, surface water, ground	• .		
		eans any location, facility, or property as o , operate, or utilize it, including disposal s	•	law, wh	ether you now own, operate, o	r utilize it or use
		<i>lous material</i> means anything an environn ous material, pollutant, contaminant, or si		waste,	hazardous substance, toxic s	ubstance,
Rep	ort all n	otices, releases, and proceedings that yo	u know about, regardless of wher	n they o	ccurred.	
24.	Has an	y governmental unit notified you that you	may be liable or potentially liable	under	or in violation of an environme	ntal law?
	■ No	o es. Fill in the details.				
	Name Addre	of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice
25.	Have y	ou notified any governmental unit of any i	release of hazardous material?			
	■ No)				
		es. Fill in the details.				
	Name Addre	of site SS (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice
26.	Have y	ou been a party in any judicial or adminis	trative proceeding under any envi	ronmen	ntal law? Include settlements a	nd orders.
	■ No					
		es. Fill in the details.	Count on oneman	Matura	of the same	Ctatus of the
	Case I	Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	Status of the case
Pa	rt 11: G	Give Details About Your Business or Conn	nections to Any Business			
27.	Within	4 years before you filed for bankruptcy, d	id you own a business or have an	y of the	following connections to any	business?
		A sole proprietor or self-employed in a tr	ade, profession, or other activity,	either f	ull-time or part-time	
		A member of a limited liability company ((LLC) or limited liability partnersh	ip (LLP)		
		A partner in a partnership				
		An officer, director, or managing executi	ve of a corporation			
		An owner of at least 5% of the voting or e	·			

Business Name

(Number, Street, City, State and ZIP Code)

Address

Describe the nature of the business

Name of accountant or bookkeeper

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

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Debtor 1	Kelly Robert Johnston
Debtor 2	Jamie Lyn Johnston

Case number (if known)

28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial
	institutions, creditors, or other parties.

No

Name

Address (Number, Street, City, State and ZIP Code)

Date Issued

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Debtor 1	Kelly Robert Johnston		
Debtor 2	Jamie Lyn Johnston		Case number (if known)
Part 12:	Sign Below		
I have rea	nd the answers on this Statement of Financi	ial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
are true a	nd correct. I understand that making a false	statement,	c, concealing property, or obtaining money or property by fraud in connection
	nkruptcy case can result in fines up to \$250	,000, or imp	prisonment for up to 20 years, or both.
16 0.5.6.	§§ 152, 1341, 1519, and 3571.		
/s/ Kelly	Robert Johnston	/s/ Jar	mie Lyn Johnston
Kelly Ro	bert Johnston	Jamie	e Lyn Johnston
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date A	pril 14, 2017	Date	April 14, 2017
Did you a	ttach additional pages to Your Statement o	f Financial /	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you p	ay or agree to pay someone who is not an a	attorney to I	help you fill out bankruptcy forms?
■ No			
☐ Yes. N	ame of Person Attach the Bankruptcy	Petition Prep	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your case:
Debtor 1	Kelly Robert Johnston
Debtor 2 (Spouse, if filing)	Jamie Lyn Johnston
United States B	sankruptcy Court for the: Western District of Michigan
Case number (if known)	

Check	Check as directed in lines 17 and 21:									
	According to the calculations required by this Statement:									
 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 										
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
	3. The commitment period is 3 years.									
	4. The commitment period is 5 years.									

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colui Debt		mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and com	missio	ons (before all	\$	6,148.51	\$ 1,423.12
Alimony and maintenance payments. Do not includ Column B is filled in.	e payment	ts from	a spouse if	\$	0.00	\$ 0.00
All amounts from any source which are regularly portion of your or your dependents, including child support from an unmarried partner, members of your househout and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3. Net income from operating a business,	t. Include ld, your de pouse onl	regular epende y if Col	contributions nts, parents,	\$	0.00	\$ 0.00
profession, or farm	Debtor 1					
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	\$	0.00	\$ 0.00
Net income from rental and other real property	Debtor 1					
Gross receipts (before all deductions)	\$	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debto Debto				Case numbe	r (if known)			
				Column A Debtor 1		Column B Debtor 2 c non-filing		
7.	Interest, dividends, and royalties			\$	0.00	\$	0.00	
	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received the Social Security Act. Instead, list it here:	d was a benefit ı	under					
	For you\$	0.00	<u> </u>					
	For your spouse \$	0.00	<u> </u>					
9.	Pension or retirement income. Do not include any amount recepenefit under the Social Security Act.	eived that was a	a	\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the some Do not include any benefits received under the Social Security Areceived as a victim of a war crime, a crime against humanity, or domestic terrorism. If necessary, list other sources on a separate total below.	Act or payments r international or	r					
			_	\$	0.00	\$	0.00	
			_	\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Add lines 2 threeach column. Then add the total for Column A to the total for Co		5	6,148.51	+ _	1,423.12	= \$	7,571.63
12.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:						\$	7,571.63
	You are not married. Fill in 0 below.							
	You are married and your spouse is filing with you. Fill in 0	below.						
	☐ You are married and your spouse is not filing with you.	20.011.						
	Fill in the amount of the income listed in line 11, Column B, dependents, such as payment of the spouse's tax liability o							
	Below, specify the basis for excluding this income and the a adjustments on a separate page.	amount of incon	ne dev	oted to each	n purpose	. If necessary	, list additi	onal
	If this adjustment does not apply, enter 0 below.		•					
			<u>پ</u> —		_			
			\$ -\$		_			
			<u> </u>					
	Total		_	0.0	<u> </u>	py here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.						\$	7,571.63
15.	45a Canulina 44 hana	•					œ.	7,571.63
	15a. Copy line 14 here=>						Φ	
	Multiply line 15a by 12 (the number of months in a year).						x 1	2
	15b. The result is your current monthly income for the year for	r this part of the	form.				\$	90,859.56

Debtor 1

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Debto Debto			Robert Johnston Lyn Johnston		Case number (if known)		
16.	Calc	ulate t	he median family income that applies to y	ou. Follow these s	steps:		
	16a.	Fill in t	he state in which you live.	MI			
	16h	Fill in th		4	_		
			he number of people in your household.	4	_		82,985.00
	100.	To find	he median family income for your state and I a list of applicable median income amounts tions for this form. This list may also be avai	, go online using tl		\$	02,903.00
17.	How	do the	e lines compare?				
	17a.		Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				termined under
	17b.	•	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your Dis			
Part	3:	Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4	1)		
18.	Сор	y your	total average monthly income from line 1	1		\$	7,571.63
19.	cont	end tha	marital adjustment if it applies. If you are t calculating the commitment period under 1 come, copy the amount from line 13.				
			narital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b.	Subtra	act line 19a from line 18.			\$	7,571.63
20.	Calc	ulate y	our current monthly income for the year.	Follow these step	os:		
	20a.	Copy li	ine 19b			\$	7,571.63
		Multipl	y by 12 (the number of months in a year).			_ x	12
	20b.	The re	sult is your current monthly income for the y	ear for this part of t	the form	\$	90,859.56
	20c.	Copy t	he median family income for your state and	size of household	from line 16c	\$	82,985.00
	21	How d	o the lines compare?				
			•	an ordered by the	court on the ten of page 1 of this form of	hook hov 2 The	aammitmant
			ine 20b is less than line 20c. Unless otherwieriod is 3 years. Go to Part 4.	se ordered by the o	court, on the top of page 1 of this form, c	neck box 3, The	e communent
			ine 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	less otherwise ord	ered by the court, on the top of page 1 o	f this form, chec	ck box 4, The
Part	4:	Sign	Below				
	By s	igning h	nere, under penalty of perjury I declare that t	he information on t	this statement and in any attachments is	true and correc	t.
Х	/s/	Kelly F	Robert Johnston	×	(/s/ Jamie Lyn Johnston		
			pert Johnston of Debtor 1		Jamie Lyn Johnston Signature of Debtor 2		
			14, 2017		Date April 14, 2017		
			DD / YYYY		MM / DD / YYYY		
	If yo	u check	ed 17a, do NOT fill out or file Form 122C-2.				
	If yo	u check	ed 17b, fill out Form 122C-2 and file it with t	his form. On line 3	9 of that form, copy your current monthly	income from lir	ne 14 above.

Kelly Robert Johnston

Fill ir	this info	ormation to iden	itify your	case:								
Debte	or 1	Kelly Robert J	Johnstor	1								
Debte	or 2	Jamie Lyn Jol	hnston									
(Spo	use, if filin											
Unite	d States I	Bankruptcy Court	for the:	Western Dis	strict of Michiga	an						
Case (if kn	number own)								Check if thi	s is an ar	mended	filing
Offici	al Form 1	22C-2										
		13 Calcu	latior	of You	ur Dispo	sable I	ncom	ie				04/16
		form, you will ne Period (Official F			copy of <i>Chapt</i>	er 13 Statem	ent of Yo	ur Current Mo	nthly Inco	me and Ca	alculation	n of
space	is neede	e and accurate a ed, attach a sepa es, write your na	rate she	et to this for	m, Include the	are filing toge e line numbe	ether, bot r to which	th are equally h additional in	responsibl formation	e for bein applies. O	g accura In the top	te. If more any
Part	1: Ca	lculate Your Dec	ductions	from Your I	ncome							
the	e questio	I Revenue Servions in lines 6-15. I may also be ava	To find t	he IRS stand	dards, go onli	ne using the						
ex	penses if	expense amounts they are higher th d do not deduct a	an the st	andards. Do	not include any	y operating ex	penses th	nat you subtrac	ted from inc	ome in line		
lf y	our expe	nses differ from m	nonth to n	nonth, enter t	he average ex	pense.						
No	te: Line n	umbers 1-4 are n	ot used ir	n this form. T	hese numbers	apply to infor	mation red	quired by a sim	ilar form us	ed in chap	ter 7 case	es.
5.	The nu	mber of people	used in o	determining	your deduction	ons from inco	ome					
	plus the	ne number of peo e number of any a nber of people in	additional	dependents						4		
Na	tional St	andards	You mu	st use the IR	S National Star	ndards to ans	wer the qu	uestions in line	s 6-7.			
6.	Food, 6 Standa	clothing, and oth	ner items ar amoun	s: Using the n t for food, clo	number of peop othing, and othe	ole you entere er items.	d in line 5	and the IRS N	lational	\$_		1,509.00
7.	the doll people	-pocket health ca ar amount for out who are 65 or old than this IRS amo	t-of-pocke derbeca	et health care use older pe	e. The number opple have a hig	of people is sp ther IRS allow	plit into two	o categoriesp	eople who	are under (65 and	

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Debtor 1 Debtor 2		Celly Robert Johnston amie Lyn Johnston				Case number (if	known)			
Peop	ole w	vho are under 65 years of age								
	7a.	Out-of-pocket health care allowance per person	\$	54						
	7b.	Number of people who are under 65	Χ	4						
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	216.00		Copy here=	> \$	216.00		
Peop	ole w	vho are 65 years of age or older								
	7d.	Out-of-pocket health care allowance per person	\$	130						
	7e.	Number of people who are 65 or older	X	0						
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=	> \$	0.00		
	7g.	Total. Add line 7c and line 7f			\$	216.00	Сору	total here=>	\$	216.00
Loca	ıl Sta	andards You must use the IRS Local Standards to	answer th	ne questic	ons in line	es 8-15.				
Base	ed o	n information from the IRS, the U.S. Trustee Progr tcy purposes into two parts:		•			d for hous	ing for		
_	•	ing and utilities - Insurance and operating expense	es							
_		ing and utilities - Mortgage or rent expenses								
sepa 8.	rate Hou	er the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also be using and utilities - Insurance and operating expense dollar amount listed for your county for insurance are	availabl I ses: Usir	e at the b	ankrupt mber of p	cy clerk's off	ice.		oecified	in the 626.00
		ising and utilities - Mortgage or rent expenses:						_		
	9a.	Using the number of people you entered in line 5, fill listed for your county for mortgage or rent expenses.		llar amou	nt		\$	1,118.00		
	9b.	Total average monthly payment for all mortgages and	d other de	ebts secu	red by y	our home.				
		To calculate the total average monthly payment, add contractually due to each secured creditor in the 60 r for bankruptcy. Next divide by 60.								
		Name of the creditor		rage moi ment	nthly					
		Specialized Loan Servicing	\$	8	99.16					
		9b. Total average monthly payment	\$	8	99.16	Copy here=>	-\$	899.16	Repeat on line 3	this amount 33a.
	9c.	Net mortgage or rent expense.								
		Subtract line 9b (total average monthly payment) from or rent expense). If this number is less than \$0, enter		(mortgag	e	\$	218.84	Copy here=>	\$	218.84
		ou claim that the U.S. Trustee Program's division octs the calculation of your monthly expenses, fill i					is incorred	ct and	\$	0.00
	Ex	plain why:								

Debtor 1 Debtor 2		Robert Johnston Lyn Johnston				Case	number ((if known)		
11.	Local tra	ansportation expenses	s: Check the number of vehic	les for whi	ch you claim a	an ov	vnershi	ip or operating	g expense.	
	□ 0. Go	to line 14.								
	□ 1. Go	to line 12.								
	■ 2 or m	nore. Go to line 12.								
12.			sing the IRS Local Standards							382.00
13.	Vehicle of You may	ownership or lease ex	penating costs that apply for greense: Using the IRS Local if you do not make any loan of	Standards,	calculate the	net o	owners	ship or lease	expense for each v	
Ve	hicle 1	Describe Vehicle 1:	2017 Toyota Camry 193 Location: 805 Britten Ave					84		
13a	. Ownersh	ip or leasing costs using	g IRS Local Standard				\$	471.00		
13b	. Average	monthly payment for al	I debts secured by Vehicle 1.							
	Do not in	clude costs for leased v	vehicles.							
	are contr		ly payment here and on line 1 cured creditor in the 60 mont			t				
	Nan	ne of each creditor for	r Vehicle 1	Average payment						
	Toy	ota Financial Service	es	\$	142.03					
		Total A	Average Monthly Payment	\$	142.03	Cor her	-	-\$142	Repeat this amount on line 33b.	
13c.	. Net Vehi	cle 1 ownership or lease	e expense						Copy net Vehicle 1	
	Subtract	line 13b from line 13a.	if this number is less than \$0,	enter \$0.			\$	328.97	expense here	328.97
Ve	hicle 2	Describe Vehicle 2:	2017 Toyota Corolla SE 5YFBURHE8HP626267 48910-1323							
13d	. Ownersh	ip or leasing costs using	g IRS Local Standard				\$	471.00		
13e	. Average leased ve	, , ,	I debts secured by Vehicle 2.	Do not inc	lude costs for	•				
	Nan	ne of each creditor for	r Vehicle 2	Average payment						
	Toy	ota Financial Service	es	\$	190.42					
		Total a	average monthly payment	\$	190.42	Cop here	-	190.4	Repeat this amount on line 33c.	
13f.	Net Vehi	cle 2 ownership or lease	e expense						Copy net	
	Subtract	line 13e from line 13d.	if this number is less than \$0,	enter \$0.			\$	280.58	Vehicle 2 expense here => \$ _	280.58
14.			e: If you claimed 0 vehicles e allowance regardless of v						in the	0.00
15.	Addition also ded	ial public transportation	on expense: If you claimed 1 on expense, you may fill in w cal Standard for <i>Public Trans</i>	or more v hat you be	ehicles in line	11 a	nd if y	ou claim that		0.00

Debtor 1 Debtor 2 Kelly Robert Johnston
Jamie Lyn Johnston
Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expense the following IRS categories.	ses for	
16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld fror your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	m \$	575.08
17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.		
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	m \$	101.35
19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35	\$	0.00
20. Education: The total monthly amount that you pay for education that is either required:		
as a condition for your job, or		
for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool Do not include payments for any elementary or secondary school education.	l. \$	0.00
22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.	\$	0.00
Payments for health insurance or health savings accounts should be listed only in line 25.		
23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication service for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment		
expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$	0.00
 Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. 	\$	4,237.82
Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.		
25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse your dependents.		
Health insurance \$ 0.00		
Disability insurance \$ 0.00		
Health savings account + \$		
Total \$ Copy total here=>	\$	0.00
Do you actually spend this total amount? No. How much do you actually spend?		
■ Yes \$		
26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b)		0.00
27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply		
By law, the court must keep the nature of these expenses confidential.	\$	0.00

Debtor 1 Debtor 2	Kelly Robert Johnston Jamie Lyn Johnston	Case number (if known)		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating expenses on		
	If you believe that you have home energy c 8, then fill in the excess amount of home en	osts that are more than the home energy costs included in expenses on linergy costs	ne	
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the additional ary.	\$	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not more than pendent children who are younger than 18 years old to attend a private or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.		
	* Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after the date of adjustment.	\$	0.00
		he monthly amount by which your actual food and clothing expenses are allowances in the IRS National Standards. That amount cannot be more s in the IRS National Standards.		
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.		
	You must show that the additional amount of	claimed is reasonable and necessary.	\$	52.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the form of cash or financial nization. 11 U.S.C. § 548(d)(3) and (4).		
	Do not include any amount more than 15%	of your gross monthly income.	\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.	\$_	52.00
Ded	uctions for Debt Payment			
	For debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle 33a through 33e.		
	o calculate the total average monthly paym creditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.		
	Mortgages on your home			rage monthly
33a.	Copy line 9b here	=>	\$	ment 899.16
oou.			Ψ_	033.10
33b.	Loans on your first two vehicles		Ф	142.02
		=>	Ψ_	142.03
33c.	Copy line 13e here		\$_	190.42
33d.	List other secured debts:			
Nam	e of each creditor for other secured debt	Identify property that secures the debt Does payment include taxes or insurance?		
		□ No		
	-NONE-	□ Yes	\$	
		□ No		
		□ Yes	\$	
		□ Yes +	\$	
			F	
33e	Total average monthly payment. Add lines	\$ 33a through 33d \$ 1,231.61 Cop total here	í	1,231.61

Debtor 1 Debtor 2		Robert Johnston ie Lyn Johnston			Cas	se ni	umber (<i>if known</i>)			
			e 33 secured by your prima our support or the support			€,				
-	No.	Go to line 35.								
	Yes.		must pay to a creditor, in adossession of your property (con the information below.							
Name	of the	creditor	Identify property that secur	es the	debt	To	otal cure amount		lonthly	cure
-NO	NE-				\$		-	a ÷60 = \$	mount	
						_		Сору		
					Total	\$	0.00	total here=>	. \$_	0.00
			uch as a priority tax, child			nat				
_	•	•	f your bankruptcy case? 11	1 U.S.(C. § 507.					
		Go to line 36.	III of these priority claims. Do	not in	clude current or					
_	103.	ongoing priority claims, su	ch as those you listed in line	19.						
		Total amount of all past-o	due priority claims			\$	0.00	÷ 60	\$	0.00
36. P r	ojecte	d monthly Chapter 13 pla	n payment			\$				
Of the To	fice of Exec find a li	the United States Courts (fourtive Office for United State ist of district multipliers that incl	stated on the list issued by the or districts in Alabama and No s Trustees (for all other districtes your district, go online using the may also be available at the ba	orth Ca icts). g the lin	arolina) or by k specified in the	X		0		
A۷	erage	monthly administrative expe	ense				\$	Copy tota here=>		
		of the deductions for deb as 33e through 36.	t payment.						\$	1,231.61
Total	Deduc	tions from Income								
38. A o	dd all d	of the allowed deductions.								
		ne 24, All of the expenses a e allowances		\$_	4,237.82	2				
		ne 32, All of the additional e		\$_	52.00)_				
C	opy lir	ne 37, All of the deductions	for debt payment	+\$	1,231.61					
						_]			
Т	otal de	eductions		\$_	5,521.43	3	Copy total here=>		\$	5,521.43

ebtor 1 ebtor 2	Jamie Lyn Johr			Case	number	(if known)		
art 2:	Determine You	ır Disposable Income Under 1	1 U.S.C. § 1325(b)(2)				
		rent monthly income from line Current Monthly Income and C					\$	7,571.63
ci di re	hildren. The month sability payments for eceived in accordan	ly necessary income you rece ly average of any child support por or a dependent child, reported in ce with applicable nonbankrupto ended for such child.	payments, foster care n Part I of Form 122C	payments, or -1, that you	\$	(0.00	
er in	mployer withheld fro	etirement deductions. The more manages as contributions for qual (7) plus all required repayments . § 362(b)(19).	ualified retirement pla	ns, as specified	\$	363	3.05	
42. T o	otal of all deduction	ons allowed under 11 U.S.C. §	707(b)(2)(A). Copy lin	ne 38 here=>	\$	5,521	1.43	
e) th	cpenses and you ha	ial circumstances. If special cir ave no reasonable alternative, d must give your case trustee a de ocumentation for the expenses.	escribe the special ci	rcumstances and				
Desc	ribe the special ci	rcumstances	4	Amount of expen	se			
			\$					
			\$					
			\$					
			Total \$	0.00	Copy here=		0.00	
44. T o	otal adjustments.	Add lines 40 through 43.		=> \$		5,884.48	Copy here=> -\$	5,884.48
45. C	alculate your mon	thly disposable income under	* § 1325(b)(2). Subtra	act line 44 from lin	e 39.		\$	1,687.15
art 3:	Change in Inc	ome or Expenses						
ha tir yo	ave changed or are me your case will be ou filed your petition	or expenses. If the income in Formation properties of the income in Formation belong, check 122C-1 in the first colur in when the increase occurred,	the date you filed you ow. For example, if th nn, enter line 2 in the	ur bankruptcy peti e wages reported second column, o	tion ar	nd during the ased after		
Form	Line	Reason for change		Date of change		crease or ecrease?	Amount of ch	nange
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	2C-2 2C-1 2C-2 2C-1 2C-2					Increase Decrease Increase Decrease Increase Increase Decrease	\$ \$	
☐ 122 ☐ 122						Increase Decrease	\$	

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Debtor 1 Debtor 2	Kelly Robert Johnston Jamie Lyn Johnston	Case number (if known)
Part 4:	Sign Below	
į	By signing here, under penalty of perjury you declare th	hat the information on this statement and in any attachments is true and correct.
X	/s/ Kelly Robert Johnston Kelly Robert Johnston Signature of Debtor 1	/s/ Jamie Lyn Johnston Jamie Lyn Johnston Signature of Debtor 2
Date	April 14, 2017 MM / DD / YYYY	Date April 14, 2017 MM / DD / YYYY

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Debtor 1 Debtor 2 Kelly Robert Johnston

Jamie Lyn Johnston

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2016 to 03/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: ABEM

Income by Month:

6 Months Ago:	10/2016	\$5,997.24
5 Months Ago:	11/2016	\$5,997.24
4 Months Ago:	12/2016	\$6,897.23
3 Months Ago:	01/2017	\$5,999.78
2 Months Ago:	02/2017	\$5,999.78
Last Month:	03/2017	\$5,999.78
	Average per month:	\$6,148.51

Debtor 1
Debtor 2
Debtor 2
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Debtor 5
Debtor 6
Debtor 7
Deb

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 10/01/2016 to 03/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Douglas J

Income by Month:

6 Months Ago:	10/2016	\$1,119.80
5 Months Ago:	11/2016	\$1,349.50
4 Months Ago:	12/2016	\$2,084.90
3 Months Ago:	01/2017	\$1,216.50
2 Months Ago:	02/2017	\$1,460.20
Last Month:	03/2017	\$1,307.80
	Average per month:	\$1,423.12

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_fo

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:17-01870-swd Doc #:1 Filed: 04/14/2017 Page 66 of 68

United States Bankruptcy Court Western District of Michigan

In re	Kelly Robert Johnston Jamie Lyn Johnston		Case No.		
	2,	Debtor(s)	Chapter	13	
Γhe ab		FICATION OF CREDITOR I		of their knowledge.	
Date:	April 14, 2017	/s/ Kelly Robert Johnston			
		Kelly Robert Johnston			
		Signature of Debtor			
Date:	April 14, 2017	/s/ Jamie Lyn Johnston			
		Jamie Lyn Johnston			
		Signature of Debtor			

OFFICE OF THE US TRUSTEE - GR 125 OTTAWA NW STE 200R THE LEDYARD BLDG 2ND FL GRAND RAPIDS MI 49503

AMERICAN EXPRESS PO BOX 981535 EL PASO TX 79998

CITIBANK, N.A.
ATTN BANKRUPTCY
PO BOX 6191
SIOUX FALLS SD 57117

KOHL'S CREDIT RECOVERY PO BOX 3004 MILWAUKEE WI 53201

LENDING CLUB
71 STEVENSON STREET SUITE 300
SAN FRANCISCO CA 94105

MSU FEDERAL CREDIT UNION 3777 WEST ROAD PO BOX 1208 EAST LANSING MI 48826-1208

OSLA STUDENT LOAN SERVICING 525 CENTRAL PARK DRIVE, #600 OKLAHOMA CITY OK 73105

PNC MORTGAGE
PO BOX 1820
DAYTON OH 45401-1820

PROSPER FUNDING LLC 221 MAIN STREET STE. 300 SAN FRANCISCO CA 94105

SALLIE MAE PO BOX 9635 WILKES BARRE PA 18773 SPECIALIZED LOAN SERVICING 8742 LUCENT BLVD. STE. 300 LITTLETON CO 80129

SYNCHRONY BANK
ATTN BANKRUPTCY DEPT
PO BOX 965064
ORLANDO FL 32896

TOYOTA FINANCIAL SERVICES 19001 S. WESTERN AVENUE, WF22 TORRANCE CA 90501

UNITED STATES ATTORNEY'S OFF. CIVIL DIVISION PO BOX 208 GRAND RAPIDS MI 49501-0208

US DEPARTMENT OF EDUCATION PO BOX 16448 SAINT PAUL MN 55116